PTO/SB/21 (09-04)

Approved for use through 07/31/2006. OMB 0651-0031

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE collection of information unless it displays a valid OMB control number. Under the Paperwork Reduction Act of 1995, no persons are required to respond to Application Number 10/780.738 Filing Date **TRANSMITTAL** February 19, 2004 First Named Inventor **FORM** W. Rose et al. Art Unit 3611 **Examiner Name** C. Davis (to be used for all correspondence after initial filing) Attorney Docket Number R4925.0001/P001 Total Number of Pages in This Submission **ENCLOSURES** (Check all that apply) After Allowance Communication to TC Drawing(s) Fee Transmittal Form Appeal Communication to Board Licensing-related Papers of Appeals and Interferences Fee Attached Appeal Communication to TC ✓ Petition (Appeal Notice, Brief, Reply Brief) Amendment/Reply Petition to Convert to a Proprietary Information **Provisional Application** After Final Power of Attorney, Revocation Status Letter Change of Correspondence Address Affidavits/declaration(s) Other Enclosure(s) (please Identify **Terminal Disclaimer** below): Extension of Time Request Request for Refund **Express Abandonment Request** CD, Number of CD(s) Information Disclosure Statement Landscape Table on CD Certified Copy of Priority Remarks Document(s) 2 Pages Annotated Drawings 2 Pages Replacement Sheets Reply to Missing Parts/ Incomplete Application Reply to Missing Parts under 37 CFR 1.52 or 1.53 SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT Firm Name DeLio & Peterson, LLC Signature Printed name Peter W. Peterson Date Reg. No. 31.867 August 18, 2006 CERTIFICATE OF TRANSMISSION/MAILING I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on

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Date

August 18, 2006

the date shown below:

Typed or printed name

Barbara Browne

Signature

IFW S

PTO/SB/17 (12-04v2)
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Effective on 12/08/2004. ees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

FEE TRANSMITTAL For FY 2005

Applicant claims small entity s	tatus.	See 37 CFR 1.27
TOTAL AMOUNT OF PAYMENT	(\$)	0

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Complete if Known						
Application Number	10/780,738					
Filing Date	February 19, 2004					
First Named Inventor	W. Rose et al.					
Examiner Name	C. Davis					
Art Unit	3611					
Attorney Docket No.	R4925.0001/P001					

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METHOD OF PAYMENT (check all that apply)									
Check Credit Card Money Order None Other (please identify):									
✓ Deposit Account Deposit Account Number: 04-0566 Deposit Account Name: DeLio & Peterson, LLC									
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)									
Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee									
Charge any additional fee(s) or underpayments of fee(s)									
under 37 CFR 1.16 and 1.17 WARNING: Information on this form may become public. Credit card Information should not be included on this form. Provide credit card									
information and authorization									
FEE CALCULATION									
1. BASIC FILING, SEAI	RCH, AND	EXAMINATI	ON FEES						
·	FILING FEES SEARCH FEES EXAMINA					TION FEES			
Application Type	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	mall Entity Fee (\$)	Fee (\$)	Fee (\$)	Fees Paid (\$)		
Utility	300	150	500	250	200	100			
Design	200	100	100	50	130	65			
Plant	200	100	300		160	80			
				150		• •			
Reissue	300	150	500	250	600	300			
Provisional	200	100	0	0	0	0			
2. EXCESS CLAIM FEI	ES					Fee (\$)	Small Entity Fee (\$)		
Fee Description Each claim over 20 (including F	Peicenec)				50	25		
Each independent cla			eissues)			200	100		
Multiple dependent of		(360	180		
Total Claims	Extra Clai	ms Fee (\$) Fee Pa	id (\$)		Multiple Dependent Claims			
15 20 or HP =		×25.0				Fee (\$)	Fee Paid (\$)		
HP = highest number of total claims paid for, if greater than 20. Indep. Claims Extra Claims Fee (\$) Fee Paid (\$)									
Indep. Claims 2 - 3 or HP =	Extra Ciai	x 100.0		10 (\$)					
HP = highest number of inde	pendent claim								
3. APPLICATION SIZE	FEE		h +	(avaludina	alaatraniaall	r filed segmen	naa or aammutar		
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50									
sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).									
Total Sheets									
100 = / 50 = (round up to a whole number) x =									
4. OTHER FEE(S) Non-English Specification, \$130 fee (no small entity discount)									
Other (e.g., late filing surcharge):									
2 (3.8.)	0 J B	/							

SUBMITTED BY Registration No. (Attorney/Agent) 31,867 Telephone 203-787-0595 Signature Date August 18, 2006 Name (Print/Type) Peter W. Peterson

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.